

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Sharon</i>	<i>68903</i>	<i>03-27-00</i>
O.I.P.E. CLASSIFIER		<i>5</i>	<i>3-31-00</i>
FORMALITY REVIEW		<i>69652</i>	<i>06/02/00</i>
RESPONSE FORMALITY REVIEW		<i>71176</i>	<i>9/17/00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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